# Meiriceanne as a JUL 0 6 2004

# FOR INSTRUCTIONS, SEE BACK OF FORM FORM DR-2 DISCLOSURE DISCLOSURE SUMMARY PAGE (Rev. 01/98) REPORT For Office Use Only Comm. # COMMITTEE NAME (Must be same as on Statement of Organization) Indexed Elect Bruce Audited IMPORTANT: Indicate type of committee you are reporting for: Computer )Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate 5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee SIGNATURE OF TREASURER (or person filing this report) TELEPHONE DATE SIGNED Routine Penalties Due For Late Filed Reports Range from \$20 to \$800 SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR. I AM FILING A Indicate one (report date) CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election NOVEMBER 2,04 County & Local Committees, enter County in Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. which Election is held (You must continue to file reports until a Notice of Dissolution is filed.) Polk STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) ......\$ ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A)..... Schedule F: Loans Received total (Attach Schedule F)..... Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) SUB-TOTAL.....\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) ...... Schedule F: Loan Repayments total (Attach Schedule F) ..... CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) .....\$ UNPAID BILLS (From Schedule D - Attach Schedule D) ......\$ IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$ OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$ **CANDIDATE COMMITTEES ONLY:** \_\_ YES \_\_\_\_ NO CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

## For Instructions, See Back of Form

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

| COMMITTEE NAME | (Must b | e same as o | on Statement o | f Organization) |  |
|----------------|---------|-------------|----------------|-----------------|--|
| Committee      | TI      | Elect       | BRUCE          | Hunted          |  |
| Committee      |         | <u> </u>    | 27/2/10        | 1 1000          |  |

| SCHEDULE<br>A<br>(Rev. 06/97) | MONETARY<br>RECEIPTS         |
|-------------------------------|------------------------------|
|                               | CK THIS BOX IF<br>NOING FORM |

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

|   | DATE<br>RECEIVED<br>(MM/DD/YR) | PAC ID NUMBER<br>(If applicable)<br>AND PAC CHECK<br>NUMBER | NAME AND ADDRESS OF CONTRIBUTOR                                       | RELATIONSHIP<br>TO CANDIDATE*<br>(If applicable) | AMOUNT<br>RECEIVED | √ IF FOR<br>FUND-<br>RAISER<br>INCOME |
|---|--------------------------------|---|---|--|--------------------|---------------------------------------|
|   | 5/12/04                        | ск# 9865  | JAMES WENGERT<br>4024 42nd St.<br>DES Moines, IA. 50315               | NONE   | \$ 25,00           |                                       |
|   | 5/10/04                        | ID#<br>СК# 4145   | KAREN MONSON<br>2568-D 5. VAUGHN WAY<br>AUTORA, CO. 80014             | NONE   | 25.%               |                                       |
|   | 11/14/03                       | ID# 6488<br>CK# 1146  | IOWA Providers PAC<br>7025 HICKMAN Rd. StE. 5<br>URBANDATE, IA. 50322 | NONE   | 150.00             |                                       |
|   |                                | TD#<br>CK#  |   |  |                    |                                       |
|   |                                | ID# ·   |   |  |                    |                                       |
|   |                                | ID#<br>CK#  |   |  |                    |                                       |
|   |                                | ID#<br>CK#  |   |  |                    |                                       |
|   |                                | ID#<br>CK#  |   | ·  |                    |                                       |
|   |                                | ID#<br>CK#  |   | •  |                    |                                       |
|   |                                | ID#<br>CK#  |   |  |                    |                                       |
| L |                                |   |   | SUB-TOTAL  | s 200.00           |                                       |

TOTAL (if last page of this schedule)

Page 2 of 2

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

MAY 1 9 2004

| FORM |  |
|------|--|
| DR-2 |  |

DISCLOSURE REPORT

(Rev. 01/98)
For Office Use Only

# DISCLOSURE SUMMARY PAGEFLED

|   | For Office Use Only   |
|---|---|
| COMMITTEE NAME (Must be same as on Statement of Organization)   | Comm. #   |
| Committee To Elect Bruce Hunter   | Indexed   |
| IMPORTANT: Indicate type of committee you are reporting for:  | Audited   |
| (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Fyanchise Committee (7) County/City Central Committee (6) Support State of Candidates  |   |
| Harry W. Journ 515 256 - 8010   | 5/18/04   |
| SIGNATURE OF TREASURER (or person filing this report) TELEPHONE   | DATE SIGNED   |
| Routine Penalties Due For Late Filed Reports Range for  | rom \$20 to \$800   |
| SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE  | <u>:</u>  |
| I AM FILING A MAY 19, 2004 REPORT FOR ANA (1) ELE   | CTION /(2)NON-ELECTION YEAR.                                      |
| □CHECK IF AMENDMENT TO REPORT DATED   | Local Committees, enter Date of Election                          |
|   | November 2.04   |
| Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  (You must continue to file reports until a Notice of Dissolution is filed.)  | County & Local Committees, enter County in which Election is held |
| STATEMENT OF CASH ON HAND  CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)  ADD TOTAL MONEY TAKEN IN THIS PERIOD  Schedule A: Cash Contributions total (Attach Schedule A) | 1,650.00<br>-0-<br>-0-<br>11,175.28<br>2,806.54                   |
| Schedule F: Loan Repayments total (Attach Schedule F)   |   |
| CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)  | \$ 8,368.72   |
| UNPAID BILLS (From Schedule D - Attach Schedule D)  | ¢   |
| IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)   |   |
| ·   |   |
| OUTSTANDING LOANS (From Schedule F - Attach Schedule F)   |   |
| CANDIDATE COMMITTEES ONLY:  |   |
| CONSULTANT BREAKDOWN (Schedule G Attached?)   | YES NO  |
| VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)  | \$  |

For Instructions, See Back of Form

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

| COMMITTEE NAME (ME | ist be same as | s on Statement of | Organization) |  |
|--------------------|----------------|-------------------|---------------|--|
| Committee To       | Elect          | BRUCE             | Hunter        |  |

| SCHEDULE<br>A<br>(Rev. 06/97) | MONETARY<br>RECEIPTS         |
|-------------------------------|------------------------------|
|                               | CK THIS BOX IF<br>NDING FORM |

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 688.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE<br>RECEIVED<br>(MM/DD/YR) | PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS OF CONTRIBUTOR                                       | RELATIONSHIP<br>TO CANDIDATE*<br>(If applicable) | AMOUNT<br>RECEIVED | ✓ IF FOR<br>FUND-<br>RAISER<br>INCOME |
|--------------------------------|--|---|--|--------------------|---------------------------------------|
| 1/9/04                         | CK# 1151   | Riverpac<br>400 El. 3Rd St.<br>Dubugue, IA. 52001                     | NONE   | \$ 100.00          |                                       |
| 1/7/04                         | id#<br>CK# 476                                     | LAURA LARKIN White<br>910 NE CRESTMOOR PE. #101<br>ANKENY, TA. 50021  | NONE   | 25.00              |                                       |
| 1/12/04                        | ID#<br>CK# 1676                                    | Thomas I. HENDERSON<br>6239 N. Wincood DR.<br>Johnston, TA. 50131     | NONE   | 100.00             |                                       |
| 1/9/04                         | ID# 6113<br>CK# 2922                               | AF5CME/ JOHN COUNCIL 61<br>4320 NW 2nd Ave.<br>DES MoinES IA. 50313   | NONE   | 500.00             |                                       |
| 1/20/04                        | ID# . CK# 8667                                     | CRATE NEIGEN<br>8620 THEIST CIRCLE<br>LAS VEGAS, NV- 89117            | NONE   | 150.00             |                                       |
| 1/4/04                         | ID# 6099<br>CK# 983                                | MERELITH CORP.<br>1716 Locust<br>Des Moines, IA. 50309                | NONE   | 150.00             |                                       |
| 1/15/04                        | ID#<br>CK# 2426                                    | Paul Charles Shomshon JR.<br>3018 Ave. M<br>Courcil Bluffs, JA. 51501 | NOME   | 25.00              | ·                                     |
| 5/4/04                         | 1D# (1060  | AFL-CIO<br>2000 WALKER, Suite A<br>Des Moines, IA. 50317              | NONE   | 200.00             |                                       |
| 5/13/04                        |  | South Central Iowa Fed<br>2000 WALKER<br>DIS MOINES, IA, 50317        | NONE   | 100,00             | V                                     |
| 4                              | CK# 2903   | Bette L. Core<br>Po Box 1138<br>Minded, NV. 89423                     | NONE   | 100.00             |                                       |
|                                |  | TOTAL (if last page of  | SUB-TOTAL of this schedule)                      | s 1,450            |                                       |

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of (for Schedule A)

# For Instructions, See Back of Form

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

| (Including candidate's personal funds)   | (101, 00.0.) |                              |
|--|--------------|------------------------------|
| COMMITTEE NAME (Must be same as on Statement of Organization)  Committee To Elect Bruce Hunter |              | CK THIS BOX IF<br>NDING FORM |

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE<br>RECEIVED<br>(MM/DD/YR) | PAC ID NUMBER<br>(If applicable)<br>AND PAC CHECK<br>NUMBER | NAME AND ADDRESS OF CONTRIBUTOR  | RELATIONSHIP<br>TO CANDIDATE*<br>(If applicable) | AMOUNT<br>RECEIVED | √ IF FOR<br>FUND-<br>RAISER<br>INCOME |
|--------------------------------|---|--|--|--------------------|---------------------------------------|
| 5/12/04                        | <sup>ск#</sup> 9865   | JAMES WENGERT<br>4024 42Nd 3t.<br>DES MoinES, IA, 50310                | NONE   | *25.00             |                                       |
| 5 10 04                        | .ck# 70162  | KAREN MORSON<br>2568-D S. VANGHH WAY<br>ANTOFA, CO. 50014              | NONE   | 25. °              |                                       |
| 1/12/04                        | ID# 6488<br>CK# 1146  | IONA Providers PAC<br>7025 HICKMAN Rd. Swile 5<br>Upbandale, IA, 50322 | NONE   | 150.00             |                                       |
|                                | ID#<br>CK#  |  |  |                    |                                       |
|                                | ID# '   |  |  |                    |                                       |
|                                | ID#<br>CK#  |  |  |                    |                                       |
|                                | ID#<br>CK#  | ·  |  |                    |                                       |
|                                | ID#<br>CK#  |  |  | -                  |                                       |
|                                | ID#<br>CK#  |  |  |                    |                                       |
|                                | ID#<br>CK#  |  | SUB-TOTAL  | -260.∞             |                                       |

TOTAL (if last page of this schedule)

SCHEDULE

(Rev 06/97)

MONETARY

RECEIPTS

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

# **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

| SCHEDULE<br>B<br>(Rev. 09/97) | MONETARY<br>EXPENDITURES      |
|-------------------------------|-------------------------------|
|                               | CK THIS BOX IF<br>INDING FORM |

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee To Elect Bruce Hunter

| DATE<br>EXPENDED<br>(MM/DD/YR) | CANDIDATE<br>ID NUMBER<br>(if applicable)<br>AND PAC | NAME AND ADDRESS TO WHOM<br>EXPENDITURE<br>(Disbursement) WAS MADE                                 | PURPOSE<br>(DESCRIBE TRANSACTION)       | AMOUNT<br>EXPENDED |
|--------------------------------|--|--|---|--------------------|
|                                | CHECK<br>NUMBER                                      |  |   |                    |
| 2 25 04                        | CK#   184  | HOUSE TRUMAN FUND<br>FO JOWA DEMOCRATIC PARTY<br>SWI FLEUR DR.<br>DES Meines, IA, 50321            | Contribution                            | \$1,600.00         |
| 3/1/04                         | CK# 1185   | Bob LAMberti   | LEgislative Shirts                      | 84.00              |
| चे । ०४                        | CK# 1 / 8 G  | HOUSE TRUMAN FUND<br>VO IOUN DEMOCRATIC PARTY<br>5661 FLEUR DR.<br>DES MOINES, IA. 50321           | Contribution                            | 400.00             |
| 3/9/04                         | ID#<br>CK# [ 87                                      | IREASURER STATE OF IOWA<br>LEGISLATIVE OFFICE<br>STATE CAPITOL BITY. RM GK<br>DES MOINES JA. 50319 | Personalized<br>Business Cards          | 100.00             |
| 4204                           | ID#  | House Truman Fund<br>Vo Iowa Democratic Party<br>5661 Fleur PR.<br>Pes Moines, IA. 80321           | Connors Astronaut Roast                 | 100.00             |
| 4 2204                         | CK#1189  |  | Computer Paper and<br>Printer Cardridge | 65.70              |
| 43004                          | ck# / /90  | HyVEE<br>3221 S.E. 14th St.<br>DESMOINES, IA. 50320  | Sodas For<br>Fund Raiser                | 21.90              |
| 5704                           | ID#<br>ск#     <sup>9</sup>                          | USPS<br>South Des Moine Office<br>Des Moines, IA. 50315  | SHAMPS                                  | 222.00             |
|                                |  |  | SUB-TOTAL                               | \$2,593.60         |
|                                |  |  | TOTAL (if last page of this schedule)   | \$                 |

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.),

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

| _    | 3 |    | <u>`</u> .) |   |
|------|---|----|-------------|---|
| Page |   | Oī |             | - |

FOR INSTRUCTIONS, SEE BACK OF FORM

#### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

| SCHEDULE<br>B<br>(Rev. 09/97)   | MONETARY<br>EXPENDITURES |  |  |  |  |
|---------------------------------|--------------------------|--|--|--|--|
| CHECK THIS BOX IF AMENDING FORM |                          |  |  |  |  |

COMMITTEE NAME (Must be same as on Statement of Organization)
Committee To Elect Bruce Hunter

|   | <u> </u>                       | 11.11 | ia 10 DE   | y Diace Transcop   |  |                    |
|---|--------------------------------|-------|--|--|--|--------------------|
|   | DATE<br>EXPENDED<br>(MM/DD/YR) |       | CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM<br>EXPENDITURE<br>(Disbursement) WAS MADE | PURPOSE<br>(DESCRIBE TRANSACTION)      | AMOUNT<br>EXPENDED |
| 5 | [0                             | 104   | ID#<br>CK# 1192  | HYVEE<br>3221 S.E. 1445+.<br>DES Moines, TA. 50320                 | Stamps                                 | \$ 37.∞            |
| M | []                             | 18    | ID#<br>CK# (193  | CARTER Printing<br>1739 E. Grand AUE.<br>DES Moines, IA. 50316     | Flyers of Envelopes<br>For Fund Raiser | 165.36             |
| 4 | 8                              | 04    | ID#<br>CK#   | Wells Fargo<br>666 WAINLT St.<br>DES Moines, IA. 50309             | Check Return Fee                       | 2.12               |
| 3 | ,8                             | 04    | ID#<br>CK#   | Wells FArgo'<br>666 WAINUT St.<br>Des Moines, IA. 50309            | Check Return FEE                       | 2.12               |
| 2 | 9                              | 04    | ID#<br>CK#   | Wells Fargo<br>666 WAINUT St.<br>DES Moines, IA. 50309             | Check Return Fee                       | 2.12               |
| ١ | 9                              | 04    | ID#<br>CK#   | WELLS FARGO<br>666 WAI WILT ST.<br>DES MOINES, IA. 50309           | Check Return Fez                       | 2.12               |
| 5 | 10                             | 04    | ID#<br>CK#   | Walls FARGO<br>666 Walnut St.<br>DES Moines, IA.50309              | Check Return Fee                       | 2.12               |
|   |                                |       | ID#<br>CK#   |  |  |                    |
|   |                                |       |  |  | SUB-TOTAL                              | \$212.96           |

TOTAL (if last page of this schedule)

\$2,806.54

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventorled on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)